Department of Labor & Industries Apprenticeship Section PO Box 44530 Olympia WA 98504-4530



## **REQUEST FOR NEW STANDARDS**

L&I apprenticeship	

TO: Washington State Apprenticeship & Training Council			coordinator	
FROM:	NAME OF PROOPAN OPONIO	0.0		
Check Type of Standards being req Committee Plantage	NAME OF PROGRAM SPONS  uested: ant OJT	OR		
OCCUPA	TION(S):	HOURS:	DOT #:	
Requested by (chr):	Approved by: Washington St	Approved by: Washington State Apprenticeship & Training Council		
(sec)	Secretary of Counci			
Date:	Date:			